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<b>To:</b>	PATENT EXAMINER James W. Myhre	<b>From:</b>	Veronika S. Leliever
<b>Fax:</b>	703.746.5544	<b>Pages:</b>	27
<b>Phone:</b>	703.308.7843	<b>Date:</b>	April 16, 2003
<b>Re:</b>	App. Serial No: 09/283,389	<b>Phone:</b>	203.461.7246

☒ Urgent    ☒ For Review    ☐ Please Comment    ☐ Please Reply    ☐ Please Recycle

• **Comments:**

Re: Application Serial No. 09/283,389  
Attorney Docket No. 98-099  
Title: "SYSTEM AND METHOD FOR OFFERING MULTIPLE PRODUCTS"

## CERTIFICATE OF TRANSMISSION

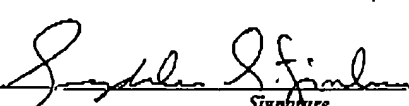
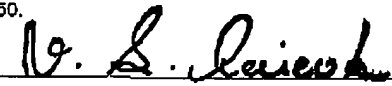
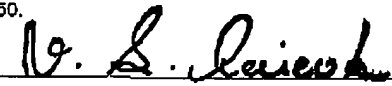
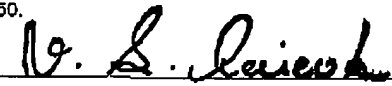
I hereby certify that this correspondence is being  
Transmitted to the United States Patent and  
Trademark Office by facsimile (Fax No. 703.746.5544) on  
August 18, 2003.

Dated: 8.18.03 By:

  
Veronika S. Leliever

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<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b> Applicant(s) <b>JAY S. WALKER et al</b>				Docket No. <b>98-099</b>																															
Serial No. <b>09/283,389</b>	Filing Date <b>April 1, 1999</b>	Examiner <b>James W. Myhre</b>	Group Art Unit <b>3622</b>																																
Invention: <b>SYSTEM AND METHOD FOR OFFERING MULTIPLE PRODUCTS</b>																																			
<p align="center"><u>TO THE COMMISSIONER FOR PATENTS:</u></p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p><input checked="" type="checkbox"/> Small-Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.</p> <p><input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.</p> <p>The fee has been calculated and is transmitted as shown below.</p>																																			
<p align="center"><b>CLAIMS AS AMENDED</b></p> <table border="1"> <thead> <tr> <th></th> <th>CLAIMS REMAINING AFTER AMENDMENT</th> <th>HIGHEST # PREV. PAID FOR</th> <th>NUMBER EXTRA CLAIMS PRESENT</th> <th>RATE</th> <th>ADDITIONAL FEE</th> </tr> </thead> <tbody> <tr> <td>TOTAL CLAIMS</td> <td>112 -</td> <td>121 =</td> <td>0 x</td> <td>\$9.00</td> <td>\$0.00</td> </tr> <tr> <td>INDEP. CLAIMS</td> <td>5 -</td> <td>6 =</td> <td>0 x</td> <td>\$42.00</td> <td>\$0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td>\$0.00</td> </tr> <tr> <td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</td> <td>\$0.00</td> </tr> </tbody> </table>							CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	TOTAL CLAIMS	112 -	121 =	0 x	\$9.00	\$0.00	INDEP. CLAIMS	5 -	6 =	0 x	\$42.00	\$0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
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TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00																														
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-0271</b></p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>																																			
 Signature			Dated: <b>August 18, 2003</b>																																
<b>Magdalena M. Fincham</b> Attorney for Applicants PTO Registration No. 46,085 Walker Digital, LLC 203.461.7041/phone 203.461.7300/fax			<table border="1"> <tr> <td>         I certify that this document and fee is being sent          August 18, 2003 by fax to 703.746.5544          under 37 C.F.R. 1.8 and is addressed to the          Commissioner for Patents, P.O. Box 1450, Alexandria, VA          22313-1450.       </td> </tr> <tr> <td>           Signature of Person Mailing Correspondence       </td> </tr> <tr> <td> <b>Veronika S. Leliever</b>          Typed or Printed Name of Person Mailing Correspondence       </td> </tr> </table>			I certify that this document and fee is being sent August 18, 2003 by fax to 703.746.5544 under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	 Signature of Person Mailing Correspondence	<b>Veronika S. Leliever</b> Typed or Printed Name of Person Mailing Correspondence																											
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